D. MELINDA SMITH, RN, MSN

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# HEALTHCARE LEADER

IN HEALTH CARE OPERATIONS, QUALITY, AND MANAGEMENT

Versatile and disciplined healthcare leader with over 20 years of experience in clinical/ health operations, quality, and management. Extensive experience in: HEDIS Quality, Payor Contract Negotiation, Nephrology, Medical Surgical/ Oncology, Medicare Advantage, Multi- State Territorial

Management, and Population Health Disease Management/ Case Management

AREAS OF PROVEN STRENGTH

Facility Management Medicare Risk Adjustment Quality

Medicare STARs/Quality Technology Proficiency Financial and Budget Management

Employer & Individual HEDIS Case and Disease Management Population Health Management

Strategic Planning Provider Engagement Strategies Project Management

Nursing Auditing Surveying Policy

Consulting Change Management Leadership/Staff development

PROFESSIONAL EXPERIENCE

Encompass Home Health

RN Care Manager 2022- 2023 per ‘diem

Assess and evaluate clients for appropriateness of home care services. Supervise LPNs in the field. Coordinate patient care with referring physician office and interdisciplinary team to minimize or eliminate hospitalizations by case management of patient care and other healthcare service needs.

• Initiate Start of Care, Resumption of Care, Recertification, and discharge when appropriate

• Perform: routine visits, wound care, intravenous care and therapies, phlebotomy as needed, ostomy care, catheter care, disease management, and patient education

• Establish patient-centered goals to accomplish during 9-week certification period of services by completing documentation and performing OASIS head-to-toe Nursing Assessments and Care Plans.

• Analyze data collected from multiple visits to determine need for further direct care with disease management.

Tegria, Remote Contract - Fulltime/ 40 hr. wk.

Clinical Surveyor August 2022- December 2022

Lead provider and facilities site visits virtually or in person as needed to pre-certify facilities for State and Federal Surveys. Audited facility policies and practices in accordance with expected state and federal regulations. Communicated survey findings to dedicated team coordinators.

* Surveyed behavioral health care facilities, primary care facilities, provider specialists, urgent care facilities, home health care facilities, and durable medical care facilities (DME).
* Audited sites for federal and state survey readiness and preparedness for operational functionality, medical documentation, facility safety, office staff documentation compliance, medication practices, emergency preparedness, accessibility, laboratory compliance, infection control, patient education rights and responsibilities, and radiation practices (where applicable).
* Delegated team coordinators followed up with sites and communicated survey findings and deadlines to return a plan of correction within 60 days of the initial survey.
* Lead follow-up surveys as needed of failed sites and reviewed corrective action plans for completion and effectiveness of executed plans.

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| United Healthcare, Remote – Fulltime 40 hrs./ wk.  |   |
| National Nursing Associate Director of Medicare Care Quality and Affordability  |  2020 – 2022  |
| Senior Nurse Clinical Transformation Consultant  |  2017 – 2021  |
| Nurse Clinical Practice Consultant  |  2014 – 2017  |

Identify national opportunities for affordability and cost saving opportunities in the following areas: inpatient and acute hospitalizations, skilled nursing facilities (SNF), emergency room visits, specialist management based on disease management, and provider member care management. Educate Vice President(s)(VP) and Regional Directors (RD) on opportunities, initiatives, and recommendations determined by disease and potential cost savings (nationally, regionally, by state, and by Accountable Care Organizations (ACOs)). Remain abreast of current recommendations and new updates from CMS regarding quality, TCM, and new and forthcoming measures as well as retiring/retired measures. Notify VP and RDs of new methods and strategies to achieve 4.5 STARs or better with client-facing accounts.

Education and Training:

* Lead national initiative trainings for VP, RD, and Clinical Transformation Consultants (CTC).
* Taught practices on the value of reporting tools and delivery of reports via Physician Portal; assist with HIT, EMR, disease registries, and other technology for ACO focus within organization to support gap closure, disease management opportunities, and risk adjustment.
* Train on-boarding employees on UHC tools available to clients, engagement strategies, meeting structure, and format for engagement.
* Ensured successful deployment of Value Based Programs ACOs. Continue project management of MaPCPI, MCAIP, and ACO initiatives.
* Achieved 4.0 and 4.2 STARs rating YoY in various STARs Incentive Programs while acting as Subject Matter Expert (SME) Lead for Quality multi-state STARs Regional Team.

Program Analysis:

* Maximized cumulative financial savings during tenure by $4.5 million.
* Utilized innovative methods to support matrix partners with managing external customers with HEDIS measures and cost containment.
* Identified ACO accounts with low performing metrics, working closely with Regional Director and CTCs to brainstorm ways to enhance performance of ACO accounts.
* Engaged with Commercial Insurance (E&I), Medicare Advantage Retirement and Individual (M&R), and Medicaid providers concerning HEDIS, Quality, Admissions, Readmissions, Emergency Room (ER), Risk Adjustment, site of service, affordability focus on quality, and cost containment within each line of business by ascertaining areas of opportunity and affordability dollars associated with financial gain.

Program Implementation:

* Designed practice readiness assessments and transformation plans while implementing appropriate training modules for practice to achieve contractually required transformation milestones.
* Reviewed, analyze, and consult with healthcare organizations to cultivate innovative solutions to practice organization and structural challenges to accomplish desired financial affordability goals.
* Monitored monthly and quarterly performance of assigned cost, utilization, and quality data. Interpret results to assess the performance of the practice; classify strategies for improvement to include specific outcomes and metrics to monitor progress.
* Generated Clinical Action reports to guide practice with care management opportunities, adjusting processes to prioritize interventions to reach clinical and cost outcomes.
* Designed interactive tools to receive feedback from providers for processes and tracking as it relates to patient health management. Determine opportunities for enhancement using CPT II codes, risk adjustment opportunities, billing, and coding capabilities of EMR system(s).

Signature Healthcare 6/2014 – 12/2014

Interim Nursing Staff Development Coordinator- Fulltime 40 hrs./ wk.

* Provided training and in-services as needed for all employees on company policy. Identify educational opportunities for staff as indicated by review of quality data
* Provided health screenings and assessments to all staff
* Reported progress of staff educational to facility administrator and director of nursing • Served as infection control nurse
* Provided monthly in-services for staff
* Administered TB skin tests, Hepatitis B vaccines as needed
* Maintained updated licensing of all licensed staff
* Assisted human resources with the onboarding process of new hire employees
* Demonstrated use of and in-service on life vest
* Maintain and updated CPR Certification for staff members
* Education on patient safety
* Update and maintained quality care base system- Raymax- tracked staff performance and management time of resident/ patients’ activities of daily living daily
* Report out on staff performance to nursing administration and facility administrator

UNIVERSAL AMERICAN/APS HEALTHCARE/COLLABORATIVE HEALTH SYSTEMS

Atlanta, GA - Fulltime 40 hrs./ wk.

2013-2014

Clinical Nurse Manager- ACC-GA *(An Accountable Care Organization shared savings program)*

* Managed the ACC-GA Accountable Care Organization 106 offices throughout Georgia population of 30,000 members
* Supervised the performance of 3 RN case managers
* Trained staff on utilization of case management platform, analytics and reporting, claims data, and areas of opportunities to reduce utilization to decrease cost and close gaps.
* Prepared presentations and review of CMS claims data by disease, ER Visit, hospitalization and dollar amounts per visit as related to avoidable hospital admissions and emergency room visits by case management/ population health management.
* Identified and created initiatives to effectively manage client’s beneficiaries collaboratively, worked closely with provider office regarding CMS 33 quality indicators for ACO, overseen data entry into EHR/ EMR by field staff by conducting audits.

SOUTHERN REGIONAL HOSPITAL, Atlanta, GA 1998- 2017

Acute Hemodialysis Nurse/ Medical Surgical Oncology Nurse (Feb 1998 – Feb 2017) Varied from fulltime 40 hrs. weekly , part-time 32 hrs. weekly, and per diem • Provided hemodialysis to patients as ordered by nephrologists

* Served as new Grad renal nurse educator.
* Cared for patients for pre-surgery pre and postoperatively on pain management and post op care.
* Cared for patients with cancer related illnesses (not chemotherapy certified) and those overflowing from cardiac floor to medical surgical oncology.
* Conducted head-to-toe nursing assessments for patients with various medical surgical needs.
* Served as charge nurse as needed
* Served on Quality Assurance Team within Acute Unit.
* Performed acute hemodialysis for critically ill patients
* Provided care to patients requiring isolation
* Started intravenous therapy
* Assisted with insertion of venous catheter
* Draw blood for blood tests as needed
* Inserted foley catheters
* Maintained patient safety
* Reviewed labs and contacted providers regarding abnormal labs
* Administered medications per provider orders
* Overseen and supervised medical assistants to ensure proper care was provided to patients
* Performed admissions and discharges for patients
* Provided nursing education to patients regarding self-care of chronic conditions and diseases • Provided wound care as needed
* Coordinated care with case management and discharge planning
* Ensured nutritional needs of patients were met
* Ensured activities of daily living were met
* Monitored heart rhythms
* Performed EKG’s as needed
* Initiated codes

UNITED HOME CARE, Atlanta, GA - Fulltime 40 hrs./ wk. 2011-2012 and 2014- 2014

RN Care Manager

* Assessed and evaluated clients for appropriateness of home care services. Supervised LPNs and nursing assistants in the field. Coordinated patient care with referring physician office regarding patient care needs.
* Coordinated patient care with interdisciplinary team to minimize or eliminate hospitalizations by case management of patient care and other healthcare service needs.
* Performed OASIS Head to toe Nursing Assessments and Care plans establishing patient centered goals to be achieved during 9-week certification period of services.
* Completed OASIS documents (by computer and by paper charting Recertification, Start of Care
* Analyzed data collected from multiple visits to determine need for further direct care with disease management.
* Educated patients on disease management related to chronic conditions
* Provided wound care
* Provided intravenous therapy
* Accessed permacath and central lines as needed
* Provided dressing changes
* Maintained a case load of patients for continuity of care

DAVITA, Atlanta, GA- Fulltime 40 hrs./ wk. 2001- 2007 and 2010-2011 Nursing Facility Administrator

As CEO of the facility, managed operations for 30 staff members 120 patients and 5 physicians; responsible for federal and state regulatory compliance with budget of $2M; conducted facility and chart audits, facilitated quality improvement meetings and Governing Body meetings protocol. Achieved total area productivity improvement by 8% within first year.

* Created a continuous audit system with qualitative and quantitative data collection system which maintained all interdisciplinary documentation and patient health data within state and federal compliance for quality reporting purposes for facility.
* Conducted quality meetings monthly to discuss disease processes and new incidences of occurrences of health disparities within facility. Ensured proper documentation and reporting.
* Worked closely with JAHCO and CMS to ensure that guidelines were followed according to recommendations and regulations.
* Created favorable budget impact of $300K by working with interdisciplinary team to get all noninsured patients’ coverage; maintained budgeted productivity consistently in all modalities with 90% success rate.
* Worked with staff to ensure proper organizational structure changes are implemented • Educate staff members on new computer applications- validated competency

FRESENIUS MEDICAL CARE NORTH AMERICA, Atlanta, GA- Fulltime 40 hrs./ wk. 2008-2010

Nursing Operations Manager/ Area Manager

* Interim Clinical Manager for dialysis patients as needed
* Instructor for Quality Boot Camp for facility managers from 30 facilities: demonstrated methods of data collection and analysis
* Reviewed and educated clinical managers on governance regarding facility surveys, staffing, policies and procedures, research and data collection.
* Managed 14 dialysis facilities 3 Acute Hemodialysis units with 14 direct reports per facility
* Reviewed payer contracts to determine if contracts were lucrative.
* Overseen fiscal financial budget
* Managed contractual relationship between health system, providers, and external vendors
* Educated managers on facility budgets noting opportunities for cost containment
* Maintained facility compliance within state and federal regulations
* Built 2 new state of the art hemodialysis facilities
* Cost savings of over 2million in expenditures (contracts, total productivity, equipment)

ADDITIONAL EXPERIENCE:

* ROCHE PHARMACEUTICALS 40 hrs. a wk., Atlanta, GA Anemia Specialist, 2007-2008

Provider interactions with profiling, medication, education, use, efficacy, pharmacodynamics, and kinetics, travel multiple states.

* DAVITA, Atlanta, GA, 40 hrs. a wk. Nursing Facility Administrator, 2001-2007
* PREFERRED MEDICAL GROUP 40 hrs a wk., Riverdale, GA, 3rd Shift Nurse, 1999-2001
* TRC 40 hrs. wk. Macon, GA, Staff Nurse/Relief Charge Nurse/3rd Shift Nurse, 1998-1999
* FRESENIUS MEDICAL CARE 40hrs. wk, Warner Robins, GA, Staff Nurse/Relief Charge Nurse/Acute Hemodialysis Nurse, 1996-1998

EDUCATION & CERTIFICATIONS

Masters Science Nursing Family Nurse Practitioner Certificate, Herzing University, Madison, WI

(Anticipated graduation date 12/20/2023)

Master of Science in Nursing, University of Phoenix, Phoenix, AZ 2011

Bachelor of Science in Nursing, University of Phoenix, Phoenix, AZ 2007

Associate of Nursing, Macon State College, Macon, GA 1996

Medicare 1 Certified 2019

Medicare 2 Certified 2019

Accountable Care Certified 2020